			_ e					_ <u>.</u>		29	191	9, 189		
PATENT APPLICATION FEE DETERMINATION RECOR									Application or Docket Number					
2/0/100														
CLAIMS AS FILED - PART I SMALL ENTITY OTHER THA														
TOTAL CLAIMS			(Column 1) (Co			<u>(mn 2)</u>	TYPE			OR	SWALL	EMMITY		
			22					RATE	FEE	4	RATE	FEE		
FOR			NUMBER FILED		NUM	JMBER EXTRA		SIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			52 minus 20= *		2	3	X\$ 9=		i	OR	X\$18=	599		
INDEPENDENT CLAIMS			クナ minus 3 =		_6	21	X40=			OR	X80=	168		
MULT	TPLE DEPEN	NDENT CLAIM P	RESENT					105			.070	1000		
* If the difference in column 1 is less than zero, enter "0" in column 2								135= OTAL	<u> </u>	OR	+270=	-000		
CLAIMS AS AMENDED - PART II									<u></u>	OR	TOTAL	2784		
(Column 1) (Column 2) (Column 3)								MALL	EMYTTY	OR	OTHER SMALL			
€	0015	CLAIMS REMAINING		HIGH	EST	PRESENT			ADDI-	1		ADDI-		
AMENDMENT A	2805	AFTER AMENDMENT		PREVIO	DUSLY	EXTRA	F	ME	TIONAL FEE		RATE	TIONAL FEE		
To	otaj	. 53	Minus	-5		= /		 \$9=	759		X\$18=	- 557		
	d pendent	. 14	Minus	··· J	4	-/				OR				
₹ FI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-	(40=	_/_	OR	X80=			
								135=	. / .	OR	+270=			
		•		•			. ADE	TOTAL HT. FEE		OR	TOTAL ADDIT, FEE			
9-7-03 (Column 1) (Column 2) (Column 3)														
20		CLAIMS REMAINING		NUM	BER	PRESENT		•	ADDI-			ADDI-		
AMENDMENT B		AFTER AMENDMENT		PREVIO		EXTRA		MTE	TIONAL FEE		RATE	TIONAL FEE		
	tel	. 40	Minus	• 5	3	=	×	\$ 9=.		OR	X\$18=			
	dependent	· 23	Minus	•••	24	•	│ 	40=			X80=			
* FI	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	700=			
								135=		OR	+270=			
								YOTAL IT. FEE		OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
وا		CLAIMS REMAINING		HIGH NUMI	ER	PRESENT			ADDI-]		ADDI-		
AMENDINEMY C		AFTER AMENDMENT		PREVIO PAID		EXTRA	R	ATE	TIONAL FEE		RATE	TIONAL FEE		
Tot	tai	•	Minus	**		=	x	\$ 9=		OR	X\$18=	,,,,,		
Ind	iependent	•	Minus	***		o	 	40=						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	X80=			
+135=										OR	+270=			
If the entry in column 1 is less than the entry in column 2, write "O" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE														
The '	rugnest Nun Highest Numi	nber Previously Paid ber Previously Paid	For (Total or	SPACE IS Indep nde	ertices) ertici (în	n 3, enter "3." highest numb r			ropriate box					

FORM PTO-875 (Rev. 8/00)